
Project 50
One Year Progress Report
By Common Ground for Los Angeles County
February 4th, 2009

Project 50

The aim of Project 50 is to move 50 of the most vulnerable chronically homeless persons from the most concentrated area of homelessness in Los Angeles County (Skid Row) into permanent supportive housing. Initiated by County Supervisor Zev Yaroslavsky in October 2007, Project 50 depends upon the collaboration of over 24 agencies, spanning the county and city government as well as the non-profit sector: the LA County Chief Executive's Office (CEO), Department of Public Health (DPH), Department of Mental Health (DMH), Department of Health Services (DHS), Department of Public Social Services (DPSS), Alcohol and Drug Program Administration (ADPA), LA County Sheriff, LA County Probation, Housing Authority of the City of Los Angeles, Office of the Mayor of Los Angeles, Los Angeles Homeless Service Authority (LAHSA), Community Development Corporation (CDC), Los Angeles Police Department (LAPD), Skid Row Housing Trust, Didi Hirsch, JWCH, Volunteers of America (VOA), LA Courts, Public Counsel, Public Defender, LA City Attorney's Office, and US Veterans Affairs. Common Ground Institute provided technical assistance and consulting support to all phases of Project 50.

Phase I: Registry Creation Process

In this phase, Common Ground staff worked in collaboration with 25 outreach personnel from throughout the County to create a by-name list of all those sleeping on the streets of Skid Row. In addition to systematically gathering the names, pictures, and dates of birth of individuals sleeping on Skid Row, the teams also captured data on their health status, institutional history (jail, prison, hospital, and military), length of homelessness, patterns of shelter or mission use, and previous housing situation. Common Ground then used its Vulnerability Index to identify individuals who have been homeless the longest and are the most vulnerable for prioritization into housing and participation in Project 50. The Vulnerability Index is based on research by Dr. Jim O'Connell which demonstrated that certain medical conditions place a homeless individual at a higher risk than others for dying if they remain on the streets.

The County conducted a baseline count on Friday, December 7th, and found 471 individuals sleeping outside between 10 pm and midnight. Starting Monday, December 9th, for nine consecutive days, teams of 5 methodically canvassed Skid Row from 4 am to 6 am and attempted to administer a 45 question survey to everyone observed sleeping. 350 surveys were administered, 77% of the baseline count. 250 pictures were taken as part of the survey. An additional 13 individuals refused to participate in the survey, but were flagged by the County workers as vulnerable. 140 (40.1%) individuals met at least one high-risk criterion from the Vulnerability Index.

The 50 individuals with the highest score on the Vulnerability Index have been recommended to Los Angeles County for inclusion in Project 50.

Phase II: Outreach and Housing Placement

Upon completion of initial training from Common Ground, the Outreach Team, comprised of LAHSA and DMH staff, returned to the streets of Skid Row to find people who had been deemed vulnerable as a result of the December surveying effort. The Outreach Team moved the first person into an apartment with Skid Row Housing Trust on January 28th, 2008. Concurrently, Skid Row Housing Trust, JWCH, and the County recruited and hired individuals to fill critical positions for the Integrated Supportive Services

Team (ISST). On a regular basis, key leaders from the collaborating agencies met to identify and remove barriers to housing on behalf of the participants. Initially, the Outreach Team restricted their efforts to the 50 individuals identified as having the most concurrent vulnerability indicators and the greatest length of homelessness. The team was able to find 30 of the original 50 persons, with 14 people never being found at all and 6 people identified as having been placed in prison before the Outreach Team had the opportunity to work with them toward housing. In the summer, the Outreach Team expanded eligibility for Project 50 to include those among the Top 75 most vulnerable and as a result of that successfully housed additional participants. Ultimately, eligibility was expanded to include anyone among the 140 vulnerable individuals identified in December.

The Outreach Team moved a total of 49 individuals directly from the streets of Skid Row into housing, completing the majority of the placements by May 2008. 96% of those who were eligible for Project 50 and approached by the Outreach Team ultimately accepted the offer of permanent housing. As a direct result of the collaboration between agencies, the median length of time from first outreach contact to housing placement was 12 days, with a record of 1 day from the streets into housing. Common Ground is unaware of any other collaborative program in the County that has accomplished such swift housing placement.

Phase III: Housing Retention

As individuals moved into housing, the Outreach Team handed off case management responsibility to the Integrated Supportive Services Team (ISST), a multi-disciplinary, multi-agency team consisting of a Director from the Department of Public Health, a Clinical Team Leader from the Department of Mental Health, part-time Doctor, Licensed Vocational Nurse, Licensed Social Worker, and Psychiatrist from JWCH, 2 case managers and a housing specialist from Skid Row Housing Trust, and 1 Substance Abuse Counselor from Didi Hirsch. The ISST was created for Project 50 and was designed to leverage the expertise of multiple disciplines to address the health and behavioral health needs of highly vulnerable people while simultaneously maximizing the potential to offset some of the costs to the County by billing MediCal. The primary responsibility of the ISST is to help participants in Project 50 maintain their housing and to support their recovery from homelessness and integration into the larger community.

To date, 43 out of 49 individuals (88%) have maintained their housing. 38 continue to be housed in supportive housing operated by Skid Row Housing Trust. Three individuals were found to have such disabling conditions that they are now in Skilled Nursing Facilities. Two individuals requested to be reunited with their families. Of the six individuals that dropped-out of housing, four individuals were arrested for non-violent crimes subsequent to being housed and are now in prison. Two individuals relinquished their apartments voluntarily and are welcome back into the program if they choose.

85% of the participants who received housing are Black/African American, 12% are White, 3% are Other. 90% are male, 10% are female. The youngest person is 34 years old, the oldest is 70, with an average age of 54. The average length of homelessness was 9.8 years and the prevalence of health conditions associated with a high mortality risk is noteworthy: 55% reported tri-morbidity (simultaneous mental health, addiction, and a serious chronic disease such as cancer, diabetes, or heart disease), 41% had been to the hospital 3 or more times in the previous year, 31% had been to the Emergency Room 3 or more times in the previous quarter, 14% reported Liver Disease, 14% reported a history of Frostbite or Hypothermia, 29% were over 60 years old, and 14% reported Kidney Disease. Three individuals (6%) discovered after enrollment in Project 50 that they were HIV+.

One of the tasks for the ISST was to enroll participants in benefits for which they are eligible. There has been a 56% increase in benefit enrollment for the participants as a result of Project 50 with many shifting from General Relief (\$220/month) to SSI (\$842/month). 43 out of 49 individuals currently receive either GR or SSI. Only 17 participants received General Relief when they started working with

the ISST, currently 27 individuals receive GR. Similarly, only 10 individuals received SSI when they started working with the ISST, currently 15 receive SSI. 16 individuals now receive MediCal, and it is anticipated that the number of individuals found eligible for SSI and MediCal will increase over the next year.

The partnership with a Federally Qualified Health Center (FQHC) through JWCH enables the participants to receive much needed primary care. It is through this mechanism that Project 50 is able to bill MediCal, thus shifting some portion of the cost of the program to appropriate State and Federal resources. JWCH has a proactive, community-oriented care delivery model and often reaches out to Project 50 participants outside of the office setting, in their homes. The number of clinic visits has increased monthly, with 128 visits in December that generated \$6,000 in offset cost for the project. It is anticipated that the number of visits to the clinic will continue to increase, as will the percentage of visits that are billable to MediCal, and the MediCal reimbursement rate, resulting in a newly leveraged critical health care resource to an underserved population at a fraction of the cost to the County.

As the number of visits to the JWCH outpatient clinic increase, there has been a corresponding decline in the number of inpatient hospitalizations and Emergency Department presentations by the participants in Project 50. In the year prior to being housed by Project 50, among the participants who remain housed, a total of 205 days of inpatient hospitalization and 133 Emergency Department admissions was discovered. Since being housed by Project 50, that number has declined substantially, to 55 inpatient days and 39 Emergency Department admissions. Several studies have documented an asymptotic decline in inpatient and Emergency Department admissions after being housed for six months, suggesting that a significant reduction in hospital use and cost is possible for Project 50 participants.

As tri-morbidity was the most prevalent vulnerability indicator among the Project 50 participants, and indeed, the most prevalent in all cities that have used the Vulnerability Index, it should come as no surprise that some of the participants struggled with addiction to drugs and/or alcohol. The Integrated Supportive Services Team wisely included a Drug and Alcohol Counselor and treatment was made available to all participants with addiction issues. 36 of the 49 individuals who have been housed by Project 50 reported a history of substance abuse when they were surveyed in December. 22 (61%) individuals have addressed their addiction since enrollment in Project 50. 19 individuals entered treatment voluntarily, most of whom are sober to this day. Two individuals did not enter treatment but became abstinent upon moving into housing. One individual, unfortunately, was unable to address her addiction issues despite the support and encouragement of the ISST and was subsequently arrested and placed in prison for other reasons. She has stated "prison is my drug treatment program." The widespread participation in drug and alcohol treatment suggests that most, though not all, individuals living on the streets who struggle with addiction will enter treatment voluntarily. Doing so results in a positive outcome for both the individual and society at a fraction of the cost of prison.

The Department of Mental Health provides several vital services to the Project 50 cohort: outreach and engagement, crisis intervention, medication support, individual and group treatment, and targeted case management. 39 of the tenants have been diagnosed with a mental illness. 37 of the 39 (95%) tenants have received mental health treatment since being placed in housing by Project 50.

The 43 participants who have remained housed by Project 50 accumulated 754 days in jail, at an estimated cost of \$79,000, in the year prior to being housed. Since being housed, the 43 individuals have spent a combined total of 142 days in jail.

While nine (18%) of the tenants housed through Project 50 reported that they were Veterans when surveyed in December, only 3 (33%) people have been confirmed as Veterans through the VA. 3 additional people are pending confirmation, while 3 others were determined not to be Veterans by the VA. At this time, no Project 50 veterans are receiving Veterans Benefits.

Cost

Project 50 is a two-year pilot with an authorized budget of \$3.6 Million. At the mid-point, the actual cost is \$1.15M. \$258,000 is funded through leveraging state MHSA dollars, resulting in a net cost to the County of \$892,000. Since Project 50 is a pilot, there were one-time start-up costs of \$352,000, resulting in a net operating cost to the County of \$540,000 annually, approximately \$11,000 per participant.

It is difficult to compare this cost figure to other programs, since it is targeted to the very most vulnerable and long-term street homeless in the County, and is comprehensive, including outreach, health care costs, medication costs, and behavioral health treatment costs. Nonetheless, perspective on the cost of this program is possible by comparing it to the amount of money that the County spent on these 43 very vulnerable and long-term homeless the year prior to Project 50. It is estimated that the County spent \$756,000 on inpatient hospitalizations, Emergency Department admissions, and jail stays for the same 43 individuals the year prior to housing, with vastly different outcomes than the Project 50 investment of even less money, spent on housing and integrated treatment. The estimate of \$756,000 does not include police costs, court costs, ambulance/emergency responder costs, health care received while in jail, occasional stays in the Missions and shelters, or any of the intangible costs associated with homelessness.

Recommendations

As consultants to Los Angeles County for Project 50, Common Ground recommends the following actions during the second year of Project 50:

- Immediately update the registry by canvassing Skid Row and administering the Vulnerability Index in the overnight hours to gain a refreshed understanding of the dynamics and maintain a roster of eligible participants
- Expedite MediCal enrollment for all remaining participants to maximize revenue from the state
- Continue to identify and cut red tape within and between agencies
- Look for opportunities to integrate the innovations and lessons learned from Project 50 into the standard operating procedures of agencies to maximize impact on other homeless individuals
- Enhance staff recruitment and retention efforts.
- Continue to identify opportunities to expand and replicate this pilot across the County.

Common Ground Institute

In 2007, Common Ground launched its Common Ground Institute (CGI), a national technical assistance initiative designed to bring innovative methodologies and hands-on field support to communities seeking solutions to homelessness. The Institute's overarching goal is to end homelessness by collaborating with government leaders, local organizations, and private developers in strategically situated communities. In each city, CGI pursues four objectives in support of this goal: create housing, build knowledge, test and model innovative solutions, and promote effective practices.

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